Grading the States 2009
NAMI National's Report on America's Health Care System for Adults with Serious Mental Illness

NAMI National developed its Grading the States report to provide a comprehensive, ongoing assessment of the nation's public mental health system for adults. The baseline report was published in 2006, and the latest report was released in March 2009, providing a state-by-state comparison to identify states which have improved and states which have lost ground in their provision of mental health services. It also offers a picture of how the national average has changed in the past three years, and what strengths, innovative trends and urgent needs can be identified, both by state and nationwide.

NAMI National embarked on this ambitious initiative to break down barriers in government that have led to the abandonment of people with serious mental illness, and to provide direction on how to invest adequate resources in effective mental health services to end the pervasive fragmentation in America's behavioral health system. Grading the States is a direct response to the 2003 presidential New Freedom Commission, which described mental health care in the United States as a "system in shambles, in need of fundamental transformation," and a 2006 report from the National Academy of Sciences' Institute of Medicine that described the U.S. behavioral care system as "untimely, inefficient, inequitable, and at times unsafe."

In the 2006 Grading the States, the states received an average grade of D, and only five states received Bs. This was the first comprehensive survey of state mental health care systems in more than 15 years. Although the initial reaction to this first report during the information gathering phase was lackluster, when the extremely poor results were released with verified documentation, stakeholders sat up and took notice. For the 2009 report, governors, legislators, state agencies, mental health professionals, consumer and family advocates, the media and taxpayers all responded with a significantly higher level of interest.

Grading the States is a useful tool in identifying gaps in Pennsylvania's mental health system and targeting efforts for institutional reforms on both local and state levels," explains NAMI Southwestern Pennsylvania's Executive Director Chris Michaels. Grading the States has captured the attention of stakeholders across the

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This edition of the newsletter is a reflection and compilation of all the exciting activities and hard work put forth by the NAMI Southwestern Pennsylvania team. Great emphasis is being placed on the word team.

We began the new year celebrating NAMI Southwest's 25-year anniversary with a "Breakfast of Champions" to appreciate and thank all the volunteers who devote and donate their time, special talents and skills to various NAMI education, advocacy and support programs and initiatives. This particular event returned us to our grassroots beginning and reminded us that we work not for individual benefit or gain but for a cause. We work for social change. We work to improve the mental health system and the services for people with mental illness, to bring about societal change in attitudes and beliefs about mental illness, and to support one another, family to family and peer to peer.

Our greatest team challenge was putting together the annual conference. What a great day April 18, 2009 turned out to be for NAMI Southwest and for everyone who came to our conference. People are still talking about it and what they learned from the speakers and workshops. We at the NAMI Southwest office learned that we are a great team, capable, motivated and confident. Look out, folks, because the team experience of doing the conference really energized us!

The team process we used was basic. A division of duties and responsibilities, task timelines, and week to week team meetings. We sat and were accountable to one another. Sometimes we could report we got the job done, and other times we admitted that we needed help. The simple mechanics of working together, interdependent of each other to get the job done, brought us together. Working as a team has become characteristic of our office. Using the togetherness to nurture and strengthen us as an organization has also strengthened our message in the community.

Over the past couple of months, we worked on various projects in addition to the conference. There has been a spike in media opportunities, radio and television interviews, and we have tried to take advantage of each opportunity. We have done various community presentations, and we are working diligently on various mental health system and legislative advocacy activities throughout the region. This newsletter reports on our many current issues and projects. So, as you read the feature article on NAMI National's Grading the States Report, think about southwestern Pennsylvania and the work of NAMI Southwestern PA. We are on target with our work efforts; we are out there and we are getting the job done.

Before I close, I missed the opportunity to recognize the NAMI Southwest team at the conference so I am going to do it now.

Thank you Debbie Ference, Susan Harrington, Darcey Garda, Don Tinker, Chris Carvino and Dick Jevon for your hard work and your dedication to the team concept and process. Day in and day out, every day, it is my honor and privilege to work with you for the mission of NAMI Southwest.

Christine Michaels, MSHSA
Executive Director, NAMI Southwestern Pennsylvania
News Around the Region
Updates on Legislation and Policy Impacting the Mental Health Community,
Debbie Ference, Associate Director, NAMI Southwestern Pennsylvania,

PA Senate Republican Budget Bill Passes
Pennsylvania Senate Republicans presented Senate Bill 850, which contains major cuts to mental health, mental retardation, autism and drug and alcohol funding. The bill was passed by a vote of 30-20 along party lines.

Senate Bill 850 reduces the Department of Public Welfare budget, which will directly affect community providers and the services they provide to the state's most vulnerable citizens. The bill reduces the community mental health allocation by over $9 million on top of Governor Rendell's 2 percent. According to the Democratic House Committee on Appropriations, this cut would eliminate services to 4,132 individuals.

Additional cuts to the Behavioral Health Services Initiative (BHSI) funds total $13.5 million. The BHSI funding cuts would come out of mental health ($6 million) and drug and alcohol ($7.5 million) and eliminate services to an additional 2,761 individuals.

Senator Max Baucus introduced The Post Deployment Health Assessment Act of 2009 to implement this program nationally. The Act would require face-to-face screening before deployment, upon return home and then every six months for two years. Interestingly, the program will help safeguard the mental health of our entire fighting force for about the same price tag as a single F-22 Fighter.

Please contact your member of Congress to let him/her know how important this bill is to our soldiers.

Medicaid Regulations Rescinded!
On May 5, the Obama Administration issued an order rescinding a number of Medicaid regulations, including separate rules of outpatient hospital services and school-based services, as well as critical portions of an interim final rule for Medicaid optional State Plan Case Management Services, also known as the Targeted Case Management rule. The portions of the rule to be rescinded include all of the most harmful and restrictive aspects related to services for beneficiaries with serious mental illness. These include: the restrictive definition of individuals transitioning to a community setting; the prohibition against "bundling" of rates; and the "intrinsic element" test (denying reimbursement for case management services that are part of another program).

IMD Exclusion Explained
Institutions for Mental Disease (IMDs) are inpatient facilities of more than 16 patient beds whose patients comprise more than 51 percent of people with severe mental illness. Federal Medicaid matching payments are prohibited for IMDs with a population between the ages of 22 and 64. IMDs for persons under age 22 or over age 64 are permitted, at state option, to draw federal Medicaid matching funds. However, inpatient nursing home care is available to seniors and disabled persons except those with severe mental illness.

While an inpatient in an IMD, the eligibility for Medicaid is extinguished. Therefore, in order to receive medical treatment for medical disorders not related to their mental

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Take Back Your Life
A Look Back at NAMI Southwestern PA’s Annual Education Conference

On Saturday, April 18, nearly 300 hundred people made their way to the Pittsburgh Airport Marriot for the 9th Annual NAMI Southwestern Pennsylvania Education Conference. The theme Take Back Your Life: Living Longer with Serious Mental Illness proved to be a compelling and diverse topic, with presentations and workshops covering post-traumatic stress syndrome, healthy eating, the mind-body connection, suicide, advocacy and more.

A highlight of the day was a panel of experts covering the many different aspects of mental health: a consumer, a family member, a government official, an insurer and a provider. Their unique and varied perspectives provided a broad, comprehensive look at the state of mental healthcare. They offered insight into what we can do to take control of our own health and the mental health of our communities.

Our conference was not without its special guests. WPXI-TV’s David Johnson, anchor of Channel 11 News, made an appearance and told the audience how he has been personally touched by mental illness in his extended family. During lunch, Deputy Secretary Joan Erney of the PA Office of Mental Health and Substance Abuse Services gave us a lively and informative overview of the current state of the mental health system in Pennsylvania.

Our conference was just the beginning. We must continue to raise awareness of the fact that people with serious mental illness are dying 25 years sooner than the rest of the population. NAMI Southwestern Pennsylvania remains committed to helping individuals with serious mental illness "take back" those years of their lives.

Thank you to our event sponsors, speakers, panelists, workshop presenters, exhibitors and advertisers for making this conference possible. 

Pictured clockwise: Exhibitor hall; David Johnson, News Anchor, WPXI; Executive Director of NAMI Southwestern Pennsylvania Christine Michaels, pictured with Keynote Speaker Matt Kuntz; Jyoti Shah, M.D., President, NAMI PA; Jim Jordan, Executive Director, NAMI PA and Ellen Kitz, Executive Assistant, NAMI PA; Christine Michaels pictured with conference presenter, John Seasock, PhD.
NAMI Southwestern Pennsylvania celebrates 25 years of volunteers at BREAKFAST OF CHAMPIONS

As part of its 25th anniversary celebration, NAMI Southwestern Pennsylvania honored volunteers at its inaugural volunteer recognition event, the Breakfast of Champions, on Saturday, Jan. 24 at the Holiday Inn, Monroeville. Seventy-five attendees gathered with NAMI to commemorate 25 years of support, education and advocacy on behalf of individuals and families affected by mental illness.

Executive Director Chris Michaels and longtime board member Dick Jevon reviewed NAMI's 25-year history in Southwestern PA and acknowledged volunteers, from the pioneers who launched the organization to the current volunteers who lead support groups, organize events and educate the community.

Michelle Wright, news anchor of WTAE-TV, was honored as the first television media personality with a significant volunteer role with NAMI Southwestern PA. A segment of the Breakfast of Champions appeared on WTAE-TV Channel 4 news immediately following pre-Superbowl coverage of our other champions, the Pittsburgh Steelers.

Thanks to all of our volunteers who helped create NAMI Southwestern PA and keep it flourishing throughout the past 25 years!

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Thank You to our generous 2009 Conference Sponsors

Supported by an educational grant from Lilly USA, LLC

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illness, they have to be discharged from the IMD, have their Medicaid eligibility reinstated, be treated in a medical/surgical setting, and then be readmitted to the IMD. Modification of the IMD exclusion should eliminate this discrimination in Medicaid against people with mental illness, eliminate bureaucratic barriers to treatment and allow for acute hospitalizations or long-term care treatment needed for individual patients.

Two specific bills are now before Congress. The complete repeal of the IMD exclusion is HR 619. The other bill—HR 1415—provides for an authorization of a demonstration program to lift the IMD exclusion for emergency psychiatric services.

Since these bills are moving on separate tracks, we will keep you informed of their progress.

Mayview Task Force Meeting Cancelled
The Mayview Land Reuse Task Force meeting scheduled for May 7 was postponed after PA Senator John Pippy met with the Department of General Services (DGS). Following comments from DGS and the co-chairs of the Task Force, it was determined that the meeting will be postponed until June. The DGS expects the appraisal of the property by June 21. Senator Pippy is currently revising the draft version of the Task Force's final report. As soon as revisions are complete, the report will be posted on the website at www.mayviewlandreusetaskforce.com. Notification of a new meeting date will be announced shortly.
NAMI Southwestern Pennsylvania would like to thank the many individuals whose gifts were received September 2008 through May 2009. Your generous gifts help to further our mission of education, support and advocacy on behalf of families and individuals who are facing serious mental illness.

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system, which lends great credibility and the voice of expertise to NAMI National and its state and regional affiliates in our advocacy efforts."

The rating system for each state is based on 65 specific, standard criteria. Pennsylvania earned a C in the 2009 report, improving its D grade from 2006. This grade represents progress and places Pennsylvania in the top half of the states. The nation's grade as a whole is still a D. The official breakdown (including Washington DC) includes 0 As, 6 Bs, 18 Cs, 21 Ds and 6 Fs. The report lists four innovations for Pennsylvania, as well as three urgent needs.

**Innovations**
- National leader in reducing the use of seclusion and restraints
- Creating Consumer and Family Satisfaction Teams (CFSTs) in all counties
- Implementing Assertive Community Treatment (ACT), Integrated Dual Diagnosis Treatment (IDDT) and other evidence-based practices
- Showing a strong commitment to training and employing peer specialists

**Urgent Needs**
- Adequate mix of hospital and community services
- Expand mental health courts and jail diversion programs statewide
- Statewide police Crisis Intervention Teams

"It is important to recognize that there is an alignment between the urgent needs identified in *Grading the States* and the initiatives that are already being worked on here in Pennsylvania," explains Michaels. "This report validates our current efforts with our state and local government agencies."

A transformed mental health care system must be focused on wellness and recovery, and centered around consumers and their loved ones. In the 2009 *Grading the States*, NAMI National describes 10 elements that are the pillars of a transformed state public mental health system. (*See sidebar.*) These pillars represent broad values across different settings that will retain their relevance over time.

**10 Pillars of a High-Quality State Mental Health System**

1. Providing comprehensive, effective services and supports.

2. Integrating multiple systems to provide coordinated care.

3. Providing adequate funding for public mental health systems and ensuring parity (equal coverage for mental health and substance abuse disorders) in public and private health plans.

4. Focusing on wellness and recovery by addressing the strong link between mental and physical wellness.

5. Creating safe and respectful treatment environments where mental health consumers are treated with dignity, informed of their conditions and play a role in determining their care and recovery.

6. Providing accessible services online and in print for consumers and family members to easily find accurate and current information regarding diagnosis, evaluation, treatments and local resources.

7. Establishing cultural competence to reduce disparities in treatment and outcomes.

8. Building consumer-centered and consumer- and family-driven systems where people with mental illness and their families are highly involved in the design, implementation and evaluation of services.

9. Fielding an adequate and qualified mental health workforce to address current critical shortages of qualified professionals while strengthening care-giving and advocacy roles of consumers and families.

10. Ensuring transparency and public accountability of the mental health system to both the people it serves and to the public at large by effectively measuring, analyzing, reporting and improving on the quality of care it delivers.
In the Media

In the first half of 2009, local media have turned to NAMI Southwestern Pennsylvania as a trusted resource for accurate, up-to-date information about mental illness and related topics. We take each opportunity very seriously, realizing the impact we can have by reaching hundreds of thousands of people with our message of hope and recovery. Here are highlights of recent media coverage featuring NAMI Southwestern PA.

**WTAE-TV Channel 4 Action News**
*Jan. 24, 2009*
**Topic: Breakfast of Champions** recognizing volunteers of NAMI Southwestern PA

**WDUQ-FM Radio**
*"Mayview"*
*April 17, 2009*
NAMI Southwestern PA’s Chris Michaels and Dick Jevon were interviewed for a story about the closing of Mayview State Hospital, particularly the implications on the behavioral health system and services for consumers.

**WDUQ-FM Radio**
*"Virtual Reality"*
*April 27, 2009*
At NAMI Southwestern PA’s annual education conference, reporter Erika Beras interviewed exhibitor Phillip Sauter about his company PMS Microdesigns’ virtual reality program that allows individuals to experience what it’s like to have delusions similar to those that a person with schizophrenia experiences.

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“NAMI Southwestern PA strongly agrees with these 10 pillars,” Michaels concludes. “To make effective, transformational changes, we need a method of comprehensive evaluation and analysis. Grading the States gives regional organizations like NAMI Southwestern PA a stronger voice in advancing our work when we can show stakeholders through this report that our vision is grounded and validated in real-life analysis and measurement.”

NAMI's *Grading the States* report was released March 11, 2009. It is available online at www.nami.org/grades09 and in printed form at www.nami.org/store. NAMI National plans to continue to produce this report every three years as a key component in the continuing public dialogue about how to build an effective public mental health system in America that is evidence-based, recovery-focused and consumer- and family-driven. This report is a national initiative coordinated through state affiliates with support from regional affiliates, including NAMI Southwestern PA.
The advocacy, education and support services provided by NAMI Southwestern Pennsylvania’s staff and dedicated volunteers give hope for recovery and a future filled with promise for the nearly 80,000 people in our region who cope with mental illness. In the Spotlight is one way NAMI recognizes the people who so diligently work to promote improvements in our behavioral health system while championing the needs of our constituents. If you wish to nominate someone to be featured in In the Spotlight, send an email to dgarda@namiswpa.org.
Allegheny County

NAMI Pittsburgh South, Mt. Lebanon
Contact: Eileen Lovell (412) 401-4015

NAMI Pittsburgh North, Ross Twp., Contact: (Day) Dick/Sarah Focke (412) 367-3062 or (Eve) Pete/Candy Venezia (412) 361-8916

NAMI Pittsburgh East-FAMILIAS, Churchill
Contact: Anne Handler (412) 421-3656

NAMI Spouse Support Group, Churchill
Contact: Mim Schwartz (412) 731-4855

NAMI Pittsburgh East-FAMILIAS, Churchill
Contact: Anne Handler (412) 421-3656

NAMI Sewickley Family Connections Support Group, Sewickley
Contact: Kathy Monahan (412) 749-7418

NAMI McKeesport, McKeesport
Contact: Cindy McHolme (412) 754-0998

NAMI Western PA Borderline/Personality Disorders Family Support Group, North Hills, Contact: Rose Schmitt (412) 487-2036

Fayette County

NAMI Fayette County, Uniontown
Contact: Carmella Hardy (724) 277-8173

NAMI-C.A.R.E. Fayette County, Uniontown
Contact: Carol Warman (724) 439-1352

Indiana County

NAMI Indiana County, Indiana, Contact: (724) 357-8105

Lawrence County

NAMI Lawrence County, New Castle
Contact: Sandi Hause (724) 657-0226

Washington County

NAMI Washington County, Washington
Contact: Tom Shade (724) 228-9847

Westmoreland County

NAMI Alle-Kiski, New Kensington,
Contact: Mary K. Slater (724) 335-4593

NAMI Mon Valley, Monessen & Irwin,
Contact: Harriett Hetrick (724) 872-2186

NAMI CONNECTIONS, Mt. Pleasant, *No Smoking
Meetings: 4:00-5:30 p.m., Tuesdays, Reunion Presbyterian Church
Contact: (724) 516-4623

Beaver County

NAMI Beaver County, Rochester
Contact: Diane Watson (724) 774-7571

NAMI-C.A.R.E. (Consumers Advocating Recovery through Empowerment), Beaver, Contact: (724) 775-9152

NAMI Western PA Borderline/Personality Disorders Family Support Group, North Hills, Contact: Rose Schmitt (412) 487-2036

Minority Families of the Mentally Ill, Oakland
Contact: Wilma Simmons (412) 327-4890

NAMI W.P.I.C. Family Support Group, Oakland
Contact: Merle Morgenstern (412) 246-5851

NAMI CONNECTIONS, Rochester
6:30-8:00 p.m., Mondays, Mental Health Association, Beaver County
7:00-8:30 p.m., Thursdays, Grace Evangelical Lutheran Church
Contact: (412) 366-3788

NAMI CONNECTIONS, Beaver
Meetings: 1:00-2:30 p.m., Thursdays, Aurora Psych Rehab
Contact: (412) 366-3788

Butler County

NAMI PA Butler County, Butler, Contact: Butler NAMI Office
(724) 431-0069 or Sandy Goetze (724) 452-4279

NAMI CONNECTIONS, Butler
Meetings: Sundays, 6:30-8:00 p.m., Butler Mental Health Association
Contact: (724) 431-0069

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